

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27422

FILED
Apr 16, 2008
Secretary of State

Entity Name: TROPICAL FLOWERING TREE SOCIETY, INC.

Current Principal Place of Business:

%FAIRCHILD TROPICAL GARDEN
10901 OLD CUTLER ROAD
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

%FAIRCHILD TROPICAL GARDEN
10901 OLD CUTLER ROAD
MIAMI, FL 33156

New Mailing Address:

FEI Number: 65-0127687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARSON, STEPHEN D.
12520 SW 114 AVE
MIAMI, FL 33171 US

Name and Address of New Registered Agent:

PEARSON, STEPHEN D.
13444 SW 83 RD AVE
MIAMI, FL 33156 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: STEPHEN PEARSON

04/16/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOBSON, ROB
Address: 31700 SW 194 AVE
City-St-Zip: MIAMI, FL 33030

Title: VPD () Delete
Name: PHILLIPS, DON
Address: P O BOX 830013
City-St-Zip: MIAMI, FL 33283

Title: S () Delete
Name: GEHRKE, PAUL
Address: 12121 SW 120
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: JONCKHEERE, BENOIT
Address: 27420 SW 162 AVENUE
City-St-Zip: HOMESTEAD, FL 33031

Title: T () Delete
Name: VANNOORBEECK, LUC R,
Address: 23740 S.W. 147 AVE
City-St-Zip: HOMESTEAD, FL 33032

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: OSTROWSKY, PETER
Address: 11401 SW 93 STREET
City-St-Zip: MIAMI, FL 33176

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUC R. VANNOORBEECK

TREA

04/16/2008

Electronic Signature of Signing Officer or Director

Date